APPROVAL OF CONSENT AGENDA

TOWN OF DAVIE TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: David Quigley, Planning and Zoning Manager/(954) 797-1075

PREPARED BY: David Quigley, Planning and Zoning Manager

SUBJECT: Resolution

AFFECTED DISTRICT: Townwide

ITEM REQUEST: Schedule for Council Meeting

TITLE OF AGENDA ITEM: SELECTION OF FIRM - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRMS OF CALVIN, GIORDANO & ASSOCIATES, INC., ILER PLANNING GROUP, LARUE PLANNING & MANAGEMENT SERVICES, INC., AND MELLGREN PLANNING GROUP, TO PROVIDE CONTINUING MISCELLANEOUS PLANNING SERVICES AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AGREEMENTS FOR SUCH SERVICES.

REPORT IN BRIEF: The Town occasionally requires miscellaneous planning services and has kept several firms under continuing service contracts since 2004. Because all of the contracts that were entered into in 2004 were about to expire, earlier this year, the Town solicited competitive, sealed proposals for continuing miscellaneous planning services.

A Request for Proposals (RFP) was posted on the Town's website, state-wide in Florida Bid Reporting and nationally in BidNet. RFP packages were also sent to nine (9) potential respondents. The RFP was for firms capable of providing the following general planning services: 1) Conduct special studies, including but not limited to, corridor land use studies, small area studies, neighborhood planning and other special studies. 2) Prepare, review, and process amendments to the Land Development Code. 3) Review land development plans and perform necessary inspections to ensure compliance with approved plans and Town codes. 4) Prepare, review, and process amendments to the Comprehensive Plan. 5) Provide urban design plans and services. 6) Develop and complete grant applications. 7) Conduct, complete, and evaluate Fair Housing studies and federal legislation.

The Town received four proposals. All four firms met the minimum qualifications but are also known by Town staff to have individual specialties. The selection committee

recommended that the Town enter into contracts with all four firms, recognizing that, by awarding to multiple firms, the Town could distribute work assignments that would take advantage of each firm's unique talent. The proposed resolution will allow the Town Administrator or his designee to negotiate terms and enter into continuing service contracts with all four firms. The relevant legal documents for the four firms are attached for review.

PREVIOUS ACTIONS: n/a

CONCURRENCES: The firms of Calvin, Giordano & Associates, Inc., Iler Planning Group, Larue Planning & Management Services, Inc., and Mellgren Planning Group were selected by the selection committee.

FISCAL IMPACT: not applicable

Has request been budgeted? Yes

RECOMMENDATION(S): Approval of the resolution.

Attachment(s): Resolution, Procurement Authorization, documents verifying legal status of businesses

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRMS OF CALVIN, GIORDANO & ASSOCIATES, INC., ILER PLANNING GROUP, LARUE PLANNING & MANAGEMENT SERVICES, INC., AND MELLGREN PLANNING GROUP TO PROVIDE CONTINUING MISCELLANEOUS PLANNING SERVICES AND AUTHORIZINGING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AGREEMENTS FOR SUCH SERVICES.

WHEREAS, the Town solicited proposals for continuing miscellaneous planning services; and

WHEREAS, the selection committee has selected Calvin, Giordano & Associates, Inc., Iler Planning Group, Larue Planning & Management Services, Inc., and Mellgren Planning Group as the firms best qualified to provide the required services; and

WHEREAS, a multiple award will allow the Town to distribute work assignments that will take advantage of special unique talents of each of the selected firms; and

WHEREAS, it is in the Town's best interest to execute contracts for such services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selections of Calvin, Giordano & Associates, Inc., Iler Planning Group, Larue Planning & Management Services, Inc., and Mellgren Planning Group as the firms best qualified to provide the required services and authorizes the Town Administrator or his designee to negotiate agreements for such services and present those contracts for approval at a future meeting date. Should no agreement be reached with any of the highest ranking firms, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

	SECTION 2.	This	resolution	shall	take	effect	immediately	upon	its	passage	and
adoptic	on.										

PASSED AND ADOPTED THIS ______ DAY OF _______, 2008

		MAYOR/COUNCILMEMBER
Attest:		
TOWN CLERK		
APPROVED THIS	DAY OF	, 2008

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER	BUDGET ITEM & DESCRIPTION	ON APPROXIMATE COST
001-0403-515.03-06 CONTRACTURE SERVICES	Misc. Planning Services	\$50,000
	MENT (check the one that applies)	
Open Competitive B Piggyback on Contr		
Sole Source	act Number	
X_ Request For Prop	osals	
SPECIFICATIONS & LIS	T OF VENDORS MUST BE ATTAC	
	Signed	MM 2.7.08
	Ü	Department Head:
	Have Fund	s been Reserved Rea 36935
	Date_ <i>2/i;</i>	Walk Signed (AM)
	0	Maria ID
	Signed	Town Administrator
	BIDS SUBMITTE	
VEN	DOR	COST
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LARKE PLANNIN	C + MANAGEMENT SETLVICES	INC. ESPEK CONTRACT
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	-	Procurement Manager
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Vendor		<u>Cost</u>
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LLOR PLANNIA	SE GROLEF SPEAMAUNG GROUP	CONTINUING SERVICE
THE MELLORE	I PEANNUNG GROUP	CONTRACTS WITH
LAKLUS PLANNIA	IL & MANACEMENT SERV	ices, INC/ ALL FIRMS
		/

Calvin, Giordano & Associates, Inc.

October 2007)	ider	Request for T atification Number	axpayer and Certificatio	n .	Give form to the requester. Do not send to the IRS.	
Name (as shown to	on your income tax return	n)				
Calvin Ginedano	& Associates, Inc.					
Business name, if	different from above					
Business name, if Check appropriat Limited listoid Other (see inst. Address (number	e box: Individual/So ty company. Enter the ta	ole proprietor	Partnership Cecorporation, Pepartnership	٠	Exempt payee	
Other (see inst	ructions) >		Reques	ster's name and	address (options)	
Address (number	, street, and apt. or suite	• no.)				
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Fort Lauderdale						
List account num	nber(s) here (optional)					
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Name of Individual, Firm, or Organization:	Calvin, Giordano & Associates, Inc.
Address:	1800 Eller Drive, Suite 600
	Fort Lauderdale, Florida 33316
FEIN	65-0013869
State and date of incorporation	Florida, 1937
OWNERSHIP DISCLOSURE AFFIDA	VIT
provided for each trustee and each benefit follows (Post Office addresses are not acc Full Legal Name	
	Suite 600, Fort Lauderdale, FL 33316)
John P. Downes (1800 Eller Drive, 5	Suite 600, Fort Lauderdale, FL 33316)
Shelley Eichner (1800 Eller Drive,	Suite 600, Fort Lauderdale, FL 33316)
ESOP (1800 Eller Drive, Suite	600, Fort Lauderdale, FL 33316)
subcontractors, materialmen, suppliers, l	dresses of any other individual (other than laborers, and lenders) who have, or will he st in the contract or business transaction was are not acceptable):
	Address
Full Legal Name	, ,

Ву	Date: March 11, 2008
Signature of Affiant	
Dennis J. Giordano Print Name	
SUBSCRIBED AND SWORN TO or affirm MANGER 200 by December	((Start A.A. in Entre.)
	Notary Public, State of Florida at Large
LORIGA S. NEWTON Noticy Public - State of Florida My Commission Expires Apr 3, 2915 Commission # DD 120922	Print or Stamp of Notary
Bended Trossph Halland Holany Assa.	Serial Number My Commission Expires:
	my Commission Expires :

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ame of Individual, Firm, or Organiz	ation: <u>Her Planning Group</u>
.ddress:	11000 Prosperity Farms Suite 206, 71m Beach G
•	Suite 206, Non Beach G
FEIN	105-0458180
State and date of incorporation	Florida 1/1/1995
OWNERSHIP DISCLOSURE AF	FIDAVIT
follows (Post Office addresses are r Full Legal Name	Address Ownership Oco Prosperity Farms R1. 100 %
	nin Beach Gardens %
	alm Beach Gardens %
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2. The full legal names and busin subcontractors, materialmen, suppany legal, equitable, or beneficial	tests addresses of any other individual (other than oliers, laborers, and lenders) who have, or will have, interest in the contract or business transaction with the
2. The full legal names and busin subcontractors, materialmen, suprany legal, equitable, or beneficial Town are as follows (Post Office	tests addresses of any other individual (other than others, laborers, and lenders) who have, or will have, interest in the contract or business transaction with the addresses are not acceptable):

Signature of Affiant

Henry Her, AICP

SUBSCRIBED AND SWORN TO or affirmed before me this 10 day of hearth 200%, by Grand Company, he/she is personally known to me or has presented Orion 1100000 as identification.



Camult Cy
Notary Public, State of Florida at Large
Cornet Cooper
Print or Stamp of Notary
DD0702637
Serial Number

My Commission Expires : 9/6/2011

W-9

Request for Taxpayer

Give form to the requester. Do not

	er 2007)	Identification Number	and Certification	l	send to the IRS.		
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Th	The Meligren Planning Group, Inc.						
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subs	tantially simil	ar to this Form W-9.	e The U.S. owner of a	natedarded e	entity and not the entity.		

Vendor / Bidder Disclosure

I, Michele Mellgren, being first duly sworn that: The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows:

The Mellgren Planning Group 6555 Nova Drive Suite 305 Davie, FL 33317

Florida Corp. Registration:

P98000089421

Incorporated:

1998

FEI Number:

650873541

OWNERSHIP DISCLOSURE AFFIDAVIT - CORPORATE

1 Officers and Directors

Full Legal Name:

Michele Mellgren, AICP

Address:

6555 Nova Drive

Suite 305 Davie, FL 33317

Ownership:

100%

2. Other Individuals

None

Man Man

Michele Mellarer

Date: 3/5/09

SUBSCRIBED AND SWORN TO or affirmed before me this 6th day of March, 2008, by Michele Meligren, she is <u>personally known to me</u> or has presented a valid Florida driver's license as identification.

Notary Public, Statelof Florida at Large

Stamp:

HEATHER LOFTUS
Commit DD0384076
Expires 1/5/2009
Bonded thru (800)432-4254
Florida Notary Assn., Inc.

Serial Number: DD0384076

My Commission Expires: 15 2009

Town of Davie: Planning Services

(Rev. November 2005)

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not

Internal Revenue Service		2010 10 1111 1110
Name (as shown on your income tax return)	***************************************	
LaRue Planning and Management Services, Inc Business name, it different from above	***************************************	
Check appropriate box: Sole proprietor Corporation Partnership Cothe Address (number, street, and apt, or suite rio.) 1375 Jackson Street Suite 208 City, state, and ZIP code Fort Myers, FL 33901 List account number(s) here (optional)	r *	D Example from backup
Address frumber, street, and apt. or suite rio.) 1375 Jackson Street Suite 206	Flequester's nar	me and address (optional)
City, state, and ZIP code Fort Myers, FL 33991		
Usi account number(s) here (optional)		
Part Taxpayer Identification Number (TIN)		
Enter your TIN in the appropriate box. The TIN provided must match the name given on line backup withholding. For individuals, this is your social security number (SSN). However, for a aften, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other em- your employer identification number (EIN). If you do not have a number, see How to get a TIN.	resident	clai security number
Note. If the account is in more than one name, see the chart on page 4 for guidelines on who number to enter.	ise Em	ployer identification number 5 0 4 1 5 3 3 4
Zigall) Certification	····	b
Under penalties of perjury, I certify that:		

- 1. The number shown on this form is my correct taxpayer identification number for I am waiting for a number to be issued to me), and
- 2 I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, equivalence of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here

Signature of U.S. person >

Hapue James S.

6-12-2008 Date 🕨

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, pancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you

- An individual who is a citizen or resident of the United
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See
 Regulations sections 301.7701-8(a) and 7(a) for additional

Special rules for partnerships, Partnerships that conduct a rade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to rorm W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income. share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity.

James G. LaRue. President, being first duly swom state that: The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable): LaRue Planning & Management Services, Inc. Name of Individual, Firm, or Organization: 1375 Jackson Street, Suite 206 Address: Fort Myers, FL 33901 FEIN 65-0415331 State and date of incorporation Florida May 10, 1993 OWNERSHIP DISCLOSURE AFFIDAVIT 1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable): Full Legal Name Address Ownership 1375 Jackson Street #206, Fort Myers, FL James G. LaRue 2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable): **Full Legal Name** Address Not Applicable

Signature of A James G. LaRu		
Print Name	or recorded	
nnanmen il	m muanuma	ned before me this 12th day of
IDSCKIBED AT Juna	ID SWORN TO or affirm 2008, by James G. La	
is personally know		
	e Service de la companya	Min -1200-L
	GLORIA L PELLI	703 (1010 × 1011
	EXPIRES September 18, 7	
	*****************	WGloria L. Pellito
		Print or Stamp of Notary
		DD716026
		DD110020
		Commission Number

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Home C	ontact Us	E-Filing Services	Document Searches	Forms H
Previous on List	Next on List	Return To List		
Events	Name History			Entity Name \$

Detail by Entity Name

Florida Profit Corporation

CALVIN, GIORDANO & ASSOCIATES, INC.

Filing Information

Document Number M17373

FEI Number

650013869

Date Filed

06/27/1985

State

FL

Status ACTIVE
Last Event AMENDMENT

Event Date Filed 03/20/2001

Event Effective Date NONE

Principal Address

1800 ELLER DR

STE 600

FORT LAUDERDALE FL 33316

Changed 04/02/2001

Mailing Address

1800 ELLER DR

STE 600

FORT LAUDERDALE FL 33316

Changed 03/02/2000

Registered Agent Name & Address

GIORDANO, DENNIS J 1800 ELLER DR

STE 600

FORT LAUDERDALE FL 33316

Name Changed: 04/02/2001

Address Changed: 03/02/2000

Officer/Director Detail

Name & Address

Title PCD

GIORDANO, DENNIS J 1800 ELLER DR STE 600 FORT LAUDERDALE FL 33316

Title V

DOWNES, JOHN 1800 ELLER DR STE 600 FORT LAUDERDALE FL 33316

Title V

JACKSON, ROBERT 1800 ELLER DR STE 600 FORT LAUDERDALE FL 33316

Title V

COOK-WEEDEN, TAMMY 1800 ELLER DR STE 600 FORT LAUDERDALE FL 33316

Title ST

GLASS, JANA 1800 ELLER DR STE 600 FORT LAUDERDALE FL 33316

Annual Reports

Report Year Filed Date

2006

01/20/2006

2007

04/23/2007

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01/25/1995 - ANN	IUAL REPORT	View image in PDF format	
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Previous on List	Next on List	Return To List	
Events	Name History		Entity Name
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Previous on List Next on List

Document Searches

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No Events

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Detail by FEI Number

Florida Profit Corporation

LARUE PLANNING & MANAGEMENT SERVICES, INC.

Filing Information

Document Number P93000034484

FEI Number

650415331

Date Filed

05/10/1993

State

FL

Status

ACTIVE

Principal Address

1375 JACKSON ST

STE 206

FT MYERS FL 33901-2845 US

Changed 05/01/1996

Mailing Address

1375 JACKSON ST

STE 206

FT MYERS FL 33901-2845 US

Changed 05/01/1996

Registered Agent Name & Address

LARUE, JAMES G 5860 UNTERMEYER CT

N FT MYERS FL 33903 US

Name Changed: 03/28/2007

Address Changed: 03/28/2007

Officer/Director Detail

Name & Address

Title DPS

LARUE, JAMES G 1375 JACKSON ST, STE 206 FT MYERS FL 33901

Annual Reports

Report Year Filed Date

2006

02/23/2006

2007

03/28/2007

2008

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Previous on List N	ext on List	Return to List		
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Previous on List Next on List

Return To List

Events

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Detail by FEI Number

Florida Profit Corporation

THE MELLGREN PLANNING GROUP INC.

Filing Information

Document Number P98000089421

FEI Number

650873541

Date Filed

10/19/1998

State

FL

Status Last Event

NAME CHANGE AMENDMENT

Event Date Filed

09/24/2007

ACTIVE

Event Effective Date NONE

Principal Address

6555 NOVA DR. SUITE 305 FORT LAUDERDALE FL 33317

Changed 12/28/2004

Mailing Address

6555 NOVA DR. SUITE 305 FORT LAUDERDALE FL 33317

Changed 12/28/2004

Registered Agent Name & Address

MELLGREN, MICHELE 6555 NOVA DR SUITE 305

FORT LAUDERDALE FL 33317 US

Address Changed: 02/16/2007

Officer/Director Detail

Name & Address

Title PSTD

MELLGREN, MICHELE C 6555 NOVA DR SUITE 305

FORT LAUDERDALE FL 33317

Annual Reports

Report Year Filed Date

2006

03/10/2006

2007

02/16/2007

2008

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01/29/2008 ANNUAL REPORT	View image in PDF format
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Previous on List Next on List

Return To List

Events

Name History

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